

## ***Sample Domestic Violence Shelter Client Survey***

Introduction: Please help us improve our services by sharing your experience with us.

Directions: Please indicate your level of agreement with the following statements:

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As a result of the services I have received:

1. This agency helped me learn how to access benefits or community resources.

Strongly Agree  
Agree  
Disagree  
Strongly Disagree  
Neutral

5 4 3 2 1

2. The information and help I received helped me feel safer.

5 4 3 2 1

3. I now have a better understanding of the cycle of domestic violence and its effect on my life.

5 4 3 2 1

4. I now have more knowledge of the options available to me.

5 4 3 2 1

5. The help I received made my choices and my decisions clearer.

5 4 3 2 1

6. I am using skills I learned at this agency to cope with my situation.

5 4 3 2 1

7. I am satisfied with the services I have received through this program.

5 4 3 2 1

***Thank you for your assistance in completing our survey!***